## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

22195 7590 07/08/2004

HUMAN GENOME SCIENCES INC
INTELLECTUAL PROPERTY DEPT.
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Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/466,778	12/20/1999	GREGG A. HASTINGS	PF487	1584

TITLE OF INVENTION: NOVEL HYALURONAN-BINDING PROTEINS AND ENCODING GENES

09466778

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		FEE PUBLICATION FEE TOTA		EE(S) DUE	DAT	E DUE
nonprovisional NO  EXAMINER  MITRA, RITA		# 137 D ART UNIT		\$0		\$1330		8/2004
				CLASS-SUBCLASS	]			
				435-069100	_			
1. Change of correspondence address or indication of "Fee Address" (3' CFR 1.363).  U Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  U "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(1) the na or agents (2) the na registered 2 registered	nting on the patent front page, mes of up to 3 registered pate OR, alternatively, me of a single firm (having as attorney or agent) and the na- de patent attorneys or agents. I name will be printed.	a member a	1 HUMAN INC .		SCIENCES

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ROCKVILLE, MD 20850 10/13/2004 WABDELR3 00000067 083425

> 1370.00 DA 12.00 DA

01. FC:1501

02 FC:8001

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

HUMAN GENOME SCIENCES, INC. THE AMERICAN RED CROSS ROCKVILLE, MD

THE WHEKTCHN KED CKOSS	PALLS CHUNCH, VA						
Please check the appropriate assignee category or categories (will not	be printed on the patent); unindividual XX corporation or other private group entity ungovernment						
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):						
XIssue Fee	☐ A check in the amount of the fee(s) is enclosed.						
☐ Publication Fee (No small entity discount permitted)	☐ Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-3425 (enclose an extra copy of this form).						
5. Change in Entity Status (from status indicated above)							
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).						
The Discourse Cale Light Control of the Land Control of the Contro	the stime For (if and a second property and insure for to the application identified above						

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office.

nterest as shown by the records of the United States Patent a	nd Trademark Of	om anyon fice.	e other than the	appneant; a	registere	a attorney or agent; or the assignce or other part
Authorized Signature)	(Date)	10	$\sim$	$\overline{\mathcal{M}}$		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a bane at both public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMIT THIS FORM WITH FEE(S)

IN LIEU OF PTO/SB/17 (10-03)
\*\*\* Please note request to charge additional fees during the pendency of the application.

F	EE	TR	AN	SMI	TΤ	AL
		for	FY	200	4	

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,382.00

Complete if Known						
Application Number	09/466,778-Conf. #1584	٦				
Filing Date	December 20, 1999	٦				
First Named Inventor	Gregg A. Hastings					
Examiner Name	R. Mitra	٦				
Art Unit	1653					
Attorney Docket No.	PF487	٦				

METHOD OF PAYMENT (check all that apply)	EEE CALCUL ATION (configured)					
	FEE CALCULATION (continued)					
Check Credit Money Order Other None	a 3. ADDITIONAL FEES					
X Deposit Account:						
Deposit	Large	Entity	Small	Entity	_	
Account 08-3425	Fee	Fee	Fee	Fee	Fee Description	F O . ! .
Number	Code	(\$)	Code	(\$)	•	Fee Paid
Deposit Account Human Genome Sciences, Inc.	1051	130	2051	65	Surcharge – late filing fee or oath	
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet.	
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130		·
Charge ree(s) indicated below Credit any overpayments	1000	130	1000	130	Non-English specification	
Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	i
X application and additional fee(s) during the <i>pendency</i> of the	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	· · · · · · · · ·
Fee Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month	
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
·	1452	110	2452	55	Petition to revive – unavoidable	
SUBTOTAL (1) (\$) 0.00	1453	1,330	2453	665	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)	1,370.00
Extra Fee from	1502	480	2502	240	Design issue fee	
Total Claims 58 -65** = x = 0.00	1503	640	2503	320	Plant issue fee	
Independent 8 -9** = 7	1460	130	1460	130	Petitions to the Commissioner	
Claims 0.30 Multiple Dependent =	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity   Small Entity	1806	180	1806	180	Submission of Information Disclosure Stmt	
Fee Fee Fee Fee Code (\$) Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1201 86 2201 43 Independent claims in excess of 3	4040	770	2046	205	For each additional invention to be	$\vdash$
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	examined (37CFR 1.129(b))	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for expedited examination of a design application	
and over original patent  Other fee (specify) 8001 Printed copy of patent w/o color (4@\$3.00)					12.00	
SUBTOTAL (2) (\$) 0.00 Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 1,5					1,382.00	
**or number previously paid, if greater; For Reissues, see above	<u> </u>				• •	
SUBMITTED BY (Complete (if applicable))						

SUBMITTED BY	(Complete (if applicable))			
Name (Print/Type) Melissa J. Pytel	Registration No. (Attorney/Agent)	41,512	Telephone	(301) 610-5764
Signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			Date	October 8, 2004